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Table of Contents

	Pages
1. Some Rorschach Ratings of Clinical Value..... W. D. Ross, M.D. and Sally Ross, M.A.	1 - 9
2. The Mental Procedure of 6 and 8 Year Old Children as Revealed by the Rorschach Ink-Blot Method..... Marguerite R. Hertz, Ph.D. and Elizabeth H. Ebert, M.A.	10 - 30
3. Rorschach Characteristics of a Group of Very Superior Seven Year Old Children..... Mollie Gair, M.S.	31 - 37
NOTES AND REVIEWS	
1. Stauder, K.H. Konstitution Und Wesenanderung Der Epileptiker. George Thieme, Leipzig, 1938, pp. 196..... Louise Collins, Ph.D.	38 - 40
2. Some Suggestions on the Use of Content Symbolism..... Zoltan Jacob, B.A.	40 - 41
3. A Note on Rorschach Pre-History..... Saul Rosenzweig, Ph.D.	41 - 42
Announcements.....	43 - 45

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SOME RORSCHACH RATINGS OF CLINICAL VALUE

W.D. Ross, M.D.* and Sally Ross, M.A.

Apart from the use of the Rorschach method to obtain a qualitative picture of the personality of a patient, there are clinical possibilities in its use in a quantitative way. It should be possible to obtain scores based on Rorschach "signs" which can be shown to correlate with clinical syndromes, and which can be handled by statistical methods similar to those used in the validation of psychometric procedures. The "organic" and "neurotic" signs of Piotrowski and of Miale and Harrower-Erickson were steps in this direction. We have criticized these signs because they were presented in such a manner as to suggest they were measuring clinical entities rather than reflecting psychological processes. We have also objected to the looseness of the definition of some of the signs, especially "color shock" and "shading shock", which leads easily to subjective distortion in their use.(1)(2) The present report represents another step towards the establishment of quantitative Rorschach scores on a more firm foundation. It is hoped that the extension of this approach on larger numbers of individuals and with the help of more refined statistical procedures should enable the Rorschach method to provide quotients as useful as the much emphasized I.Q's. achieved in psychometric methods, and this in addition to the unique qualitative contribution in which the Rorschach technique is unrivalled.

These new scores have been obtained from the Rorschach records of a group of 50 psychoneurotic patients, one of 24 patients with either cerebral neoplasm or recent severe brain injury, and two groups of 50 control individuals, They have been validated subsequently on a number of patients with "neurotic" and "organic" features associated with head injury. The scores were derived by studying the incidence in these groups of as many separate signs as might be expected to be of value. We followed the principle demonstrated in psychometric studies that, other things being equal, the greater the number of different items in a test the greater the validity of the total score. As starting points the following were used: the signs described by Oberholtzer as pointing to brain injury (3), the features described by Harrower-Erickson as occurring in brain tumors (4), all of Piotrowski's "organic" signs (5), and some of Miale and Harrower-Erickson's "neurotic" signs (6), including the modifications in these suggested by Harrower-Erickson (7). "Color Shock" and "shading shock" were not used but instead were analyzed into several component signs, such as failure on a card, with specification of the card failed, or delay or deviation on a specified card. Other signs not presented by these previous authors were also tried out in regard to their incidence in both the "neurotic" and "organic" groups as compared to the "normals".

One noteworthy feature of this study was the degree of overlap. Some of the signs occurred in greater than normal frequency in both the "neurotic" and "organic" groups. Other signs, however, showed a tendency to differentiate between "neurotic" and "organic" patients. Furthermore, two signs were found to occur in both the "neurotic" and normal groups in comparison with the "organic" group. For these reasons it was possible to divide the signs into

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four groups: (1) Those common to "neurotic" and "organic" patients; (2) The "neurotic" differential signs; (3) The "organic" differential signs, and (4) the "organic" excluding signs. Weights were then given to each sign in rough proportion to the difference of its incidence in the groups of individuals being compared. The four sets of scores could then be combined for each individual to give two ratings. The first of these, obtained by adding the "common" scores and the "neurotic" scores, and subtracting the "organic" scores, we have called an "Instability Rating". The second one, obtained by adding the "common" scores and the "organic" scores, and subtracting the "neurotic" scores and the "organic" excluding scores, we have called a "Disability Rating". The first rating is measuring something which is present in "neurotic" patients, and also in both "neurotic" and "organic" patients when one has allowed for features present in "organic" patients, but not in "neurotics". Instability seems to be an appropriate label for such a pattern. The second rating is measuring something present in "organic" patients, and in both "organic" and "neurotic" patients when one has allowed for features present in "neurotics" and not in "organics" and for other features found more often in "normals" and "neurotics" than in "organics" and disability seems to be an appropriate label for such a pattern.

With this explanation of the derivation of the scores we are in a position to present the system of scoring, and finally the incidence of the two ratings in various groups of individuals, as well as some intercorrelations with simple psychometric scores.

Table I presents the scoring key. Most of the signs are understandable as items in the standardized scoring of the Rorschach Institute (8). Some of the terms, which are marked with an asterisk when they first appear in the table, require special definition.

Failure on a card is scored if the card is put down without any interpretation, i.e., this is the same as refusal or rejection but the significance of the lack of an interpretation differs according to the card in which it occurs.

Delay on a card is scored if the latent period before the first response is more than 20 seconds longer than the mean latent period for all first responses given. When a card has been failed the latent period before it is put down or before any remarks made about it is not included in the mean upon which delay is based.

Deviation is scored for a card in relation to the performance of the subject in the rest of the record. It cannot be scored for more than three cards in the record for then it no longer represents a departure from the usual performance. The deviation may occur in respect to number of responses per card, location, form accuracy or nature of content. The difference in number of responses must be marked, e.g., from four to one, or six to two, and it is not scored if a well elaborated popular or a highly organized whole has been given with the impression that the subject feels he has dealt adequately with the card. A shift from an emphasis on W and D to one on S, dd and d constitutes a deviation in location. Where the general performance is of average form accuracy, a deviation consists in the first answer to a card being minus, or several answers to the card being minus. When the general performance is of F + accuracy the occurrence of mediocre F answers in similar situations is considered a deviation. Deviation in content includes a vague and poor anatomical answer or gruesome content when these are also poor form, e.g., "The inside of the body", "the result of vivisection, bones and bits of flesh attached." X-ray or anatomical drawing answers are not

considered deviation if they are not scorable as F-. It is questionable whether answers involving blood in cards II or III in records without morbid content trend in other cards should be considered deviation, but, as can be seen from our key, the sign "deviation" was only of practical significance in cards VII, VI, IX and X. Deviation is the least precisely defined of all our signs. It is the one sign which retains some of the subjectivity which we have criticized in "color shock" and "shading shock", but it does not contribute a large share of the total ratings. It is retained because it appears to indicate trends similar to failure and delay but not always picked up by these signs.

Absence of popular is scored for a card where there is a common response given by most normal individuals. These do not quite correspond with the ten popular answers suggested by Klopfer (8) (pp 179-180), as all of these ten have not been found to be among the most frequent answers in large scale use of the Rorschach method (9). The answers for which absence is penalized in our key are as follows: an animal skin or a furry animal should be present on either card IV or VI, two human figures or cartoon animals in human movements should be seen in III, two spiders, crabs or other many legged creatures in X, either two animals or two human figures in II, two animals in motion in VIII, a winged creature in I and a winged creature in V.

Abstraction is scored for the impairment or loss of the power of abstraction as explained by Kelley (8) (p. 346).

Piotrowski's signs are used as defined by him (5) (10) and as presented by Klopfer and Kelley (8) (pp. 330-335).

Holding cards one way up deals with the type of performance in which the subject retains each card as given to him without any attempt to look at it from any other aspect. Along with the failure to give more than one response on any card and the giving of over 75% whole answers, this feature is a little more common in patients with brain disease than in psychoneurotics although all three features can occur in supposedly normal individuals.

All these signs are based on the spontaneous answers given in the performance proper and elaborated in the inquiry. Additional responses given in the inquiry were not counted, although these may well modify the qualitative impression of the record apart from its quantitative ratings. A further development of this rating technique might employ the use of half scores for additional responses as suggested in another context (11). This, however, has not been done here.

When a record is given with complete or almost complete anatomical perseveration (12) the procedure followed is to repeat the test after the inquiry for the anatomical record, with the instructions to give only answers other than parts of the body. The scoring is then based on this second record with the exception that the signs perseveration, anatomical percentage over 30 and animal plus anatomical percentage over 60 are scored for their presence in the first record even though they do not occur in the second record.

Table II presents the means and standard errors for the two ratings in various groups of individuals:

Psychoneutoric patients - Fifty cases from the wards and outpatient clinics of the Montreal Neurological Institute and the Royal Victoria Hospital. The

diagnosis was based on the presence of characteristic symptoms, the absence of significant physical disease, and a history of a relationship of symptoms to emotional stress. They included cases of anxiety neurosis, anxiety hysteria, hysteria, obsessive-compulsive neurosis, and reactive depression, in random distribution, the first two being the most frequent. Some of these individuals may have been no more "unstable" than average but reacting to difficult situations. The group on the whole, however, might be expected to contain more unstable individuals than a non-neurotic group.

"Organic"* brain disease - Twenty-four cases of cerebral neoplasm, subdural haematoma or severe brain injury with positive neurological evidence of contusion, divided about equally between tumor and injury.

Superior healthy individuals - Fifty controls free from symptoms, nearly all university graduates. Although no intelligence tests were done on these individuals the mean I.Q. of the group must have been over 120.

R.C.A.M.C. personnel 1940 - Fifty recently enlisted privates in the Army Medical Corps examined by one of the authors in 1940. These soldiers were enlisted before the routine application of psychiatric selection in the Canadian Army and subsequent experience with this type of group would indicate the probability that the mean I.Q. would be around 90 and that most of the individuals would not be entirely free of mild neurotic symptoms and previous neuropathic traits.

Post-traumatic Cases

Within three weeks of head injury: Twenty cases divided equally in relation to amount of evidence of brain damage. The division was based on a rating of the severity of injury on a scale from 0 to 4 which is described elsewhere (13).

Over one month after head innury: Eighty-seven cases divided into two groups according to the presence or absence in their histories of three or more items from a list of items frequently found in neurotic patients, including so-called "neuropathic traits". The complete list is described elsewhere (13).

With seizures - Eleven cases of posttraumatic epilepsy.

Table III presents the intercorrelations in 52 cases of the Instability and Disability Ratings with the simple psychometric items of the Binet word list and the span of digits.

Table IV presents the post-traumatic cases in whom results with the Binet word list and the span of digits were available as well as the presence or absence of "neurotic background" as defined above.

Table V presents a summary of the significance of the comparisons between the groups in Table II.

From these tables we can see that the Instability Rating shows a fairly high negative correlation with the Binet word list (Table III) which itself shows a high correlation with the Total Binet scale (.81± .04 (14)).

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*The reiteration presented by using both the terms "organic" and brain disease is suffered because of popular usage and not on any assumed dualism.

At the same time the Instability Rating makes a differentiation between two groups of post-traumatic cases according to the presence or absence in their histories of items commonly found in psychoneurotics (Table IV) whereas neither the Binet word list, the span of digits, nor the Disability Rating makes such a differentiation. The Instability Rating is highest in psychoneurotic patients, post-traumatic cases with neurotic background, and post-traumatic epileptics, and lowest in the control cases of very superior intelligence. It is intermediate in cases of "organic" brain disease and marked evidence of brain damage, in post-traumatic cases without neurotic background, and in enlisted soldiers of low average intelligence and probably slight neurotic trends. It reaches a level not significantly different from the neurotic one in cases shortly after head injuries without much brain damage.

The Disability Rating, on the other hand, shows a negative correlation with the span of digits, (Table III), a test known to show impaired performance in some cases with brain disease. It is highest in cases after head injury with marked evidence of brain damage and in cases with brain disease. It is lowest in individuals of very superior intelligence and intermediate in cases after less severe head injury, the soldier group, psychoneurotics and post-traumatic cases with and without neurotic background. It is significantly higher in post-traumatic epileptics than in post-traumatic patients without seizures.

A few cases of depression studied recently have indicated that the Disability Rating may be high in this condition as well as in brain disease and low intelligence. This would be in keeping with the report of a similar type of scatter in an intelligence scale in patients with depression as in those with brain disease (15).

Enough has been shown to indicate the desirability of further studies of these ratings in relation to other psychometric scores as well as other clinical groups. Tentative levels for the judgment of how unstable or how mentally disabled in an individual is in relation to others of the same I.Q. can be obtained from Tables IV and II. The group in Table IV without neurotic background shows a mean Binet word list score of 23.75 which corresponds with an I.Q. of about 116 and this group presents an Instability Rating of 9.0 $\pm$ 1.39 and a Disability Rating of 5.0 $\pm$ 1.21. The group in Table II of posttraumatic cases without neurotic background, although not all individuals in it had been subjected to intelligence tests in English, many of them being French, probably represents a group close to an I.Q. of 100 and presents an Instability Rating of 12.1 $\pm$ 1.24 and a Disability Rating of 9.2 $\pm$ 1.61.

SUMMARY

As an extension of the sign method in the Rorschach technique several signs occurring in "neurotic" and "organic" subjects in comparison with controls have been combined to produce an Instability Rating and a Disability Rating. A key for the scoring of records to produce these ratings has been presented. The incidence of these ratings in various groups of patients has been presented including post-traumatic cases, with and without evidence of brain damage, and with and without histories indicating previous neurotic personality trends. The Instability Rating has been shown to be high with other evidence of neurotic trends and it also shows a correlation of -.51 $\pm$ .069 with the Binet word list although the Binet word list by itself will not differentiate subjects in relation to other evidence of neurotic trends.

The Disability Rating has been shown to be high with other evidence of brain disease and it also shows a correlation of -.46 ± .074 with the span of digits test. Tentative levels of these ratings for the comparison with them of other cases are as follows:

(1) Without neurotic trends or appreciable evidence of brain disease or damage and with I.Q. around 100; Instability 12.1 ± 1.24, Disability 9.2 ± 1.61.

(2) With evidence of neurotic personality background but no appreciable evidence of brain disease or damage and with I.Q. around 100: Instability 18.4 ± 1.61, Disability 8.0 ± 1.34.

(3) With manifest psychoneurosis, of unknown I.Q., including many cases in which situational factors may have been more important than the instability of the patient's personality: Instability 17.9 ± 1.53, Disability, 8.4 ± 1.3.

(4) With evidence of brain disease or brain damage, of unknown I.Q.: Instability 8.75 ± 2.42, Disability 25.1 ± 2.69.

(5) Individuals without symptoms with I.Q. probably over 120: Instability 3.6 ± .66, Disability 1.1 ± .75.

Table I

SCORING KEY

Group	Sign	Score
1. Common		
	Responses less than 12. .	3
	Responses between 12 & 25	2
	No human movement (M) . .	2
	No animal movement (FM) .	2
	No form with textural shading (Fc)	2
	No shading as depth (K,k,or FK)	2
	No form-color (FC). . . .	2
	No use of color (FC,CF, or C). . . .	2
	Form answers greater than 60% (F%). . . .	2
	Form and animal movement together greater than 70% (F + FM)	2
	Animal percentage greater than 60 (A%)	2
	*Failures on cards other than VI,VII,IX,X,for each	2
	*Absence of popular on both IV and VI	2
	Absence of popular on III	1
	Absence of popular on X .	1
	*Delay on Card VII. . . .	1
	*Deviation on Card VII. .	1

Group	Sign	Score
2. "Neurotic"		
	Failure on Card VI . .	6
	Failure on Card IX . .	6
	Failure on Card VII. .	4
	Failure on Card X . .	3
	Delay on Card VI . . .	3
	Delay on Card IX . . .	3
	Deviation on Card VI .	3
	Deviation on Card IX .	3
	Delay on Card II . . .	2
	Deviation on Card X. .	2
	Anatomical percentage greater than 30 (At%)	3
	Anatomical percentage between 20 and 30. .	2
	Animal plus anatomical percentage greater 60	2

*Terms defined more fully in text

Table I - continued

Group	Sign	Score
3. "Organic"		
	Poor Form (F-) greater than 30%.	3
	Poor Form (F-) between 20 and 30%.	2
	*Abstraction	3
	Perseveration (Rpt. - Piotrowski*)	3
	P% (Piotrowski).	2
	Impotence (Piotrowski) .	2
	Perplexity (Piotrowski)	2
	Color naming "	1
	Automatic phrasing "	1
	Absence of popular on II	2
	Absence of popular on VIII	2
	Absence of popular on I	1
	Absence of popular on V	1
	No movement (OM + OFM)	2
	No more than one response on any card	2
	*Holding cards one way up	1
	Greater than 75% whole answers (W%). . . .	1

Group	Sign	Score
4. "Organic" Exclusion		
	Animal movement more frequent than human movement (FM greater than M).	3
	Color-form more frequent than Form-color (CF greater than FC)	3

Ratings:

Instability = Common + Neurotic - Organic

Disability = Common + Organic - Neurotic - Organic Exclusion

Table II

INCIDENCE OF RORSCHACH RATINGS

	No. of Cases	Instability Mean	Instability S.E.	Disability Mean	Disability S.E.
Psychoneurotic patients	50	17.9	± 1.53	8.4	± 1.3
"Organic" brain disease	24	8.75	± 2.42	25.1	± 2.69
Superior healthy individuals	50	3.6	± .66	1.1	± .75
R.C.A.M.C. 1940	50	14.1	± 1.20	7.6	± 1.06
POST-TRAUMATIC CASES					
Within 3 weeks of head injury:					
Slight or no evidence of brain damage. (0 - 2)	10	16.4	± 2.85	7.3	± 2.92
Marked evidence of brain damage (3 - 4)	10	7.4	± 2.89	30.7	± 4.43
Over 1 month after head injury:					
Without neurotic background	43	12.1	± 1.24	9.2	± 1.61
With neurotic background	44	18.4	± 1.61	8.0	± 1.34
With epileptic seizures	11	18.7	± 3.95	16.8	± 3.51

Table III

	N	Instability	Disability
Binet Word List	52	-.51 ± .069	-.20 ± .092
Span of Digits	52	-.39 ± .082	-.46 ± .074

Table IV

	No. of Cases	Binet Word List Mean	Binet Word List S.E.	Span of Digits Mean	Span of Digits S.E.	Instability Mean	Instability S.E.	Disability Mean	Disability S.E.
Without neurotic background	20	23.75	± 1.19	8.0	± .36	9.0	± 1.39	5.0	± 1.21
With neurotic background	22	22.25	± 1.13	7.6	± .27	17.7	± 1.78	7.4	± 1.77
Differences		+1.5	± 1.64	+ .4	± .45	-8.7	± 2.26	-2.4	± 2.14
Fisher's "t"		.91		.89		3.85		1.12	
Probability		.30 - .40		.30 - .40		< .01		.20 - .30	
Significance		None		None		High		None	

Table V

SIGNIFICANCE OF COMPARISONS

Comparison	Instability t.	Instability Signif.	Disability t.	Disability Signif.
Neurotics with sup. healthy	8.6	++	4.87	++
"Organics" with sup. healthy	2.05	+	8.6	++
Neurotics with "organics"	3.18	++	5.6	++
Slight brain damage with marked brain damage	2.02	0	4.3	++
With and without neurotic background	3.1	++	.58	0
With and without seizures	.67	0	2.3	+

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THE MENTAL PROCEDURE OF 6 and 8 YEAR OLD CHILDREN AS REVEALED BY THE RORSCHACH INK-BLOT METHOD

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One of the essential functions of the Rorschach Method is to describe the mental procedure which an individual adopts in approaching situations and problems. In an early monograph, Rorschach (21, 22) analyzed responses to the ten ink-blots in the test series for the parts which the subject selected for interpretation. One of his classifications included these categories,--whole, (W), normal detail, (D), rare detail, (Dr), and space detail (S) for describing the location areas of the responses.** Wholes referred to reactions given to the blot in its entirety. Normal details were those sub-wholes (Teil-Ganze) which emerged most readily as separate parts because of the Gestalt properties of the blots. They were defined as those areas selected most frequently by a normal group of subjects. Rare details were those which were not normal for the group. Finally, space details referred to the white spaces rather than to the black or colored silhouettes.*** The proportions obtained among these categories constituted Rorschach's formula for the "Erfassungstypus" which may be translated as the Manner of Mental Approach.

By definition, the Manner of Mental Approach reveals the way in which the individual approaches the stimulus material, i.e., the ink-blots. Rorschach responses are generally viewed as a projection of the individual's personality and as a valid sampling of the characteristic reactions to his environment (Frank, 7; Hertz, 14; Klopfer and Kelley, 17). Hence this proportion may be said to reflect the individual's typical approach to situations and everyday problems. Does he take a broad flexible or inflexible approach to his environment as evidenced by predominance of W's? Does he survey the entire situation and then analyze it into its important parts, as indicated by W's with D's? Can he see what others in his group see (D)? Can he generalize and abstract (W)? Or does he become preoccupied with details and lose himself in minutiae (Dr)? Is he critical, selecting every possible angle of a problem for consideration (Dr and S)? Does he do the different and unusual thing when confronted by a situation (Dr and S)? Does he show oppositional traits by reading meanings into parts of a situation which others generally do not see (S)? In other words, what is the characteristic mental procedure of the individual in approaching a new and objective situation?

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** For a detailed description of the symbols used for the various Rorschach factors, reference should be made to Hertz, M.R. The scoring of the Rorschach Ink-blot Method as developed by the Brush Foundation; Rorschach Research Exchange, 1942, 16, 16-27.

*** Rorschach likewise distinguished an "oligrophrenic detail" or Do which he applied to responses of a part of a body where the normal subject gives the whole body. There is question whether this category belongs in the classification of the "Manner of Mental Approach" or whether it should be included under Content of response. Obviously it is a combination of both, since a Do may be a normal detail or a rare detail, depending upon the area selected, and the concept also involves Content. The Do category is not included in the present study.

These location categories like other Rorschach factors must be interpreted in terms of the propensity of each card to elicit them. The cards were originally selected for the test series because, among other things, they had certain Gestalt properties. Some, for example, elicit wholes more readily than details; others stimulate more details than wholes (Rorschach, 21, p.47). Obviously, it is more difficult to respond in terms of whole answers to blots which do not readily stimulate wholes than to those which do. Thus wholes in cards which elicit them readily have a different value in terms of difficulty than those in cards whose properties do not lend themselves to such configurational reactions. The interpretative value of location categories depends, then, among other factors, upon their distribution in the series.

It is possible, however, that these distributions may vary for different age groups. Certain blots may stimulate children to give whole responses more easily than details whereas those same cards may elicit details more readily from adults. Therefore, the need for studying the distribution of these categories in the series for various age groups is apparent.

In addition, the location categories are influenced by other factors in the psychogram. They depend, for example, on the quality of the responses, the accuracy with which forms are seen, the extent to which the imaginative activity is involved in the response, the nature of the content, the degree of originality, and so forth. They depend also upon the intellectual level and emotional makeup of the subject. Thus, both the incidence and the quality of the location categories are subject to many influences.

Nevertheless, some investigators are of the opinion that despite these variable influences, the proportion among the various location categories tends to be constant and that norms for the Manner of Mental Approach may be established. Such norms were first suggested by Rorschach and Oberholzer (23), for an adult group. When 34 responses are given, they said the following proportions are considered normal: 8 W 24 D 1-2 Dr 1 S (23, p. 241). This formula represents the distribution of the location categories following the Gestalt properties of the cards where no category is especially overweighted or underestimated. In terms of percent, this could read 24% W, 71% D, Ø3-Ø6% Dr, Ø3% S.

Many examiners have followed the norms offered by Rorschach and Oberholzer for the Mental Approach formula. The ratio of one W to three D is generally taken as the norm especially for adults. According to Brosin and Fromm, this ratio may be regarded as a "constant" and is maintained to a high degree even throughout many types of psychopathology (3, p. 12).

Other Rorschach workers have modified the formula to some extent. Beck has changed it to read 6 W 21 D 4 Dr when the total number of responses is 31 (1, p. 194-195). Thus he anticipates the following percentages in a normal adult record 19% W 68% D 13% Dr. Klopfer and Kelley (17) suggest as the norm, 20-30% W and 50-70% usual details. They write: "a subject following completely these Gestalt properties of the cards is expected to use a whole card in about one-quarter of the total responses, the usual detail areas in about one-half to two-thirds of his responses. . ." (17, p. 258).

For adolescent children, 12 to 16 years of age, an early study based on 300 Junior High School students in Cleveland established the following norms: 6.78 W, 14.08 D, 1.93 Dr, .9 Do, and 1 S (Hertz, 8). As a result of further experimental work, percentages are now used and the following formula is employed at the Brush Foundation for pre-adolescent and adolescent children:

20-30% W, 50-65% D, 5-15% Dr, 2-5% S. Subsequent work with specific age groups has varied these figures to some extent. For example, 12 year old children give on an average 36 responses (P.E. 9) where the distribution is: 9.36 W (P.E. 3.85), 19.14 D (P.E. 6.41), 5.53 Dr (P.E. 3.80), and 1.79 S (median). The mean percentages are: 29% W (P.E. 14%), 51% D (P.E. 10%), 13% Dr (P.E. 8%), and a median of 5% S (Q 3%). Fifteen year old children give on an average 37 responses where the proportion is 7.38 W (P.E. 3.32), 21.00 D (P.E. 6.64), 6.62 Dr (P.E. 4.78), and 1.55 S (Median) (Q 1.16), and 25% W (P.E. 13), 56% D (P.E. 9), 14% Dr (P.E. 8), 3.6% S (Median) (Q 3.07)*.

As indicated elsewhere (Hertz, 11, 12, 14, 15), few studies report norms for younger age groups. In fact, not even the criteria for determining Rorschach scores have been systematically determined for younger children. It is obvious that details scored "normal" for adults may not be normal for young children. Some details may be normal for children which are not given with high frequency by adults. On the other hand, some details may be normal for many groups, perhaps universally normal. Thus normal and rare details must be determined for various age groups.

As indicated in previous articles, most examiners have followed Rorschach in adopting a quantitative and statistical criterion for the determination of the normal detail (Hertz, 11). A few rely on the qualitative criteria which they have described for themselves. Beck (1) has published a list of normal details based on frequency distribution, but he specifically states that he did not have normal younger children. The studies published by the Brush Foundation establishing scoring criteria apply to adolescent groups (Hertz, 10, 11). The scoring of the D and other sub-divisions listed in the recent manual by Klopfer and Kelley (17) are based for the most part on qualitative criteria which have been formulated subjectively.

Whatever procedure is followed, it is obvious that criteria must be appropriate to the age group and must be systematically determined for specific age groups.

It has been observed that young age groups are prone to give more whole answers than older groups. If true, this is the norm rather than the exception and a high % W cannot be interpreted as an overweighting of the W factor except in terms of adult norms. This is similarly true of D, Dr, and S. If one is interested in comparing a child with his peers, it is necessary to determine norms for these factors for as many different age groups as possible or at least for many age ranges.

Few studies have been devoted to amassing norms for younger age groups. Davidson and Klopfer (5) have listed norms for children of school age as reported in the literature up to 1938. These lists include few reliable studies for children under 8 years.

In more recent years, some preliminary material has appeared on the validity of the application of the method to school children but neither scoring nor norms appropriate to this age range have been developed or employed. Paulsen (19), for example, recognizing the need for knowing what is the so-called normal or average response of children at each age level, presented a report on school beginners, 82 children, age range approximately 5 years 11 months to 6 years 11 months. Rorschach results were studied in conjunction with other tests and clinical material. Criteria for scoring the

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*. Data to be published shortly.

children's records appear, however, to have been based on adult records.

In a recent study, Stavrianos (24) reports on sex differences in 131 children, ages 5 to 11 years. Of this group, 40 children are in the group 5 to 7 years of age; 51 in the group 7 years 1 month to 9 years of age. Adult scoring criteria are used for the various Rorschach categories. In interpreting results, adult norms are used as the point of reference.

Klopfer and Margulies (18) present a study of 155 children, 2 to 7 years of age. Of this group, 52 subjects were within the age range 5 to 5 years 11 months, 23 subjects, 6 to 6 years 11 months. The authors identify successive patterns of early Rorschach reactions: a) an undifferentiated reaction to the blots called "magic repetition", b) rejection of cards or "magic repetition", c) interpretation to most of the blots. The 5 and 6 year old children fall in the last category. A steady decrease in the percentage of children who use only W's and a corresponding increase in children who select detail areas are reported. For the most part, it was found that children used the most obvious detail areas. What these were specifically for children was not ascertained, however.

Three manuals have appeared in English in the last decade. Beck's early monograph (1) contains few references to "normal children". He specifically states that he had no control group of normal children. In fact, he emphasizes the need for establishing norms for each chronological age level or better still, for certain age ranges (1, pp. 2-3). The manual by Klopfer and Kelley (17) contains no norms for younger children and few references to children of school age. The recent book by Bochner and Halpern (2) contains a chapter on children's records but neither scoring criteria nor scoring norms applicable to the records of children are introduced.

Problem

The present paper analyzes the Manner of Mental Approach in children 6 and 8 years of age. The material for the study consists of the Rorschach records of 242 six year old and 208 eight year old children. The following specific problems are attacked.

1. The determination of normal details (D) in the records of 6 and 8 year old children.

2. Comparison of normal details as statistically determined in 6 and 8 year old groups.

3. Determination of the propensities with which the various blots elicit whole, normal detail, rare detail, and space detail responses in the two age groups.

4. Determination of the characteristic mental approach of 6 and 8 year old children.

5. Comparison of the characteristic mental approach of the two age groups studied.

6. Comparison of the characteristic mental approach of 6, 8, 12 and 15 year old children and adults.

Subjects

The experimental groups consisted of 242 six year old children, 111 boys and 131 girls, and 208 eight year old children, 90 boys and 118 girls. All were American born white children, participating in the study of mental and physical development at the Brush Foundation. The average IQ was 117 (1916 Stanford-Binet) at 6 years of age and 124 (1937 Stanford-Binet) at 8 years of age. This difference in the average I.Q. of the two age groups does not represent a difference in ability as I.Q.'s on these two Stanford revisions are not numerically equivalent but tend to run higher on the 1937 revision (Ebert, 6). The groups may, therefore, be characterized as high average to superior in intelligence.

Procedure

As part of the routine procedure, each child received a Rorschach examination by a trained Rorschach worker. The method employed was essentially that which had been developed at the Brush Foundation (Hertz 9, 13). Uniform record blanks and code charts (13) were employed. Every attempt was made to use uniform directions although with the younger children these were necessarily flexible with wide latitude left to the examiner. All responses were recorded verbatim on record sheets. Unlimited time was permitted for each test. After the test, attempts were made to get as detailed an inquiry as possible with children so young. All information elicited after the test was written on the record sheets in the appropriate column left for the inquiry.

For the determination of the normal details for these younger age groups, the same procedure was employed as was used with the pre-adolescent and adolescent group in a former study (Hertz, 11). Frequency distributions of the number of times specific areas were selected were prepared for each blot. As with the older group, the 20th percentile was adopted as our criterion of normalcy and the normal details were then enumerated for each card and for both age groups.

Frequency tables were likewise prepared for both age groups, for determining F+, F-, O and P. Discussion of this work will be deferred for a later paper.

Once the criteria for scoring were systematically established for the various Rorschach categories, the records of the children were scored and summarized for both groups. The total number of responses per card was computed for each age group together with the total number and percentage of each category. The present paper reports the results for R, W, D, Dr and S. These were summarized for both groups and the norms for the Manner of Mental Approach were established.

Results

1. The Normal Details

Table 1 presents the list of normal details for each blot and for each age group as determined by the 20th percentile criterion. The table also includes a summary of the details normal for both age groups combined. The number of whole answers has likewise been introduced for each card. The location areas selected most frequently by either the 6 or the 8 year old children (or both) are listed with the code symbols in use at the Brush Foundation. Reference must be made to Hertz (9, 13) for further explanation

of the code system employed in locating the responses to the blots. Throughout the present paper, areas are located in terms of these code symbols as listed in Table 1.

It may be observed that more whole than detail responses are given to all the blots by the 6 year group. Following Rorschach, Card III is considered whole whether the red areas are incorporated in the response given or the black alone is employed. In this latter case, Klopfer's cut-off whole symbol is employed (W*). It may be noted that more cut-off wholes are given to Card III than entire wholes. In the 8 year group, more whole responses than detail responses are given to blots I, II, III, IV, V, VI and VII. More detail responses than wholes are given to Cards VIII, IX and X.

From Table 1 it may also be observed that more normal details are given by the 8 year group than by the 6 year group. Of those given by both, 25 are the same for both groups. For the 6 year group, 39 details are normal. Of these, 35 or 90% are also normal for the 8 year group. An additional 17 details are normal for 8 year old children, making a total of 52 D's. Only 67% of the normal details of the 8 year group are normal for the 6 year group.

In Card I, the side and middle figures elicit the most detail responses in both age groups. Details 21, 12 and 3 do not fall in the range of normalcy in the younger group although they are normal for the older group. In Card II, the older children show detail 12 as normal while the younger select this area with much less frequency. For Card III, normal details are the same for both age groups studied, except detail 2 which is normal for the 8 year group but not for the 6 year group.

Details 3 and 1 in Card IV are normal for the older group but not for the younger. Detail 5 does not attain normal rating in the older group, though it is normal in the younger. In both age groups, however, it has a borderline frequency.

Card V is overwhelmingly answered as a whole. In the 6 year group, only two details, the lower projections and the center "rabbit" are normal details. In the older group, however, the center section is not selected with enough frequency to warrant normal rating. There is some question whether this would hold in a more extensive sample since experience with children of many ages has led to the acceptance of this portion as a normal detail. The top and bottom areas, however, 2 and 1 respectively, the sides, S, and the side projection 6 are given with sufficient frequency in the older group to be rated normal. Only one normal detail, area 2, is common to both groups in Card V.

It may be noted that in Card VI, the only difference between the two groups appears in detail 2 which is normal for the older group only. In Card VII, the thirds emerge as distinct parts in both groups, the top two-thirds (1+2), eliciting most responses, the lower third (3+3) coming next in frequency. The smaller lighter shaded middle area bottom, 6, is normal for the 6 year group, but not for the 8 year group. Details 1 and 2 do not elicit separate responses in the younger group with sufficient frequency to warrant a normal rating, while they do in the older group. The middle area between the bottom sections, 12, is normal for the older group only.

In Card VIII, the "animal" figure, 1, elicits the most responses in both the 6 and 8 year groups. It is again apparent that younger children respond to combinations of details, 2+5, 3+4, more frequently than they do to

the details separately, 2, 5, 3, and 4. In the 6 year group, details 3, 4, and 5 taken separately do not attain normal rating as in the 8 year group. Only three details, 1, 2+5, and 3+4 are normal for both groups as a result.

Areas 10, 13, and 41, in Card IX cannot be considered normal in the younger group because of infrequency. They become normal, however, in the older children. There is more agreement, however, in Card X where the normal details are approximately the same with the exception of area 5 which is not normal for the younger group and 10 which is not normal for the older group.

These normal detail lists were employed in the scoring of the Rorschach records of the two age groups studied. Until further research dictates the need for their modification, these normal details may be employed in the scoring of the records of other 6 and 8 year old children of similar background and status. Since there is considerable difference in the number of normal details in the two groups, it is probably wiser to use the list appropriate to the age group rather than the composite one which has been introduced into the table for analysis.

2. Norms

Table 2 presents the total number and percentage of W's, D's, Dr's and S's given with the total number of responses (R) for each card and for the test as a whole at the two ages studied.

It may be observed that 6 year old children given an average of 22 responses; 8 year old children give 27 responses. These figures are higher at both ages than those reported by Klopfer and Margulies (18) who report for 52 children, 5 to 6 years of age and for 23 children 6 to 7 years of age, an average of 18.4 R. Paulsen's (19) average for school beginners is also lower, 15 R. Similarly, Stavrianos (24) reports an average R of 10.7 (boys) and 12.6 (girls) for her age group 5 to 7 years. The higher averages obtained with the present groups may be explained in terms of the higher mental level of the subjects although the experimental group of Klopfer and Margulies was likewise rated from high to superior intelligence.

In the present study, 6 year old children give an average of 8.95 W, 8.46 D, 3.78 Dr and .53 S.* Expressed in percent, the Manner of Mental Approach for 6 year children is 41% W 39% D 17% Dr 2% S. Thus 6 year old children appear to give as many W's as D's and over twice as many W's or D's as Dr's. Less than one space detail is given on an average. These figures agree to some extent with Klopfer's (5) suggestions that 5-6 year old children give on an average 7.9 W 10 D 1 Dr .6 S. The 6 year group give more Dr as defined in the present study.

Table 2 likewise shows the Manner of Mental Approach for 8 year old children: 7.35 W 14.03 D 4.64 Dr .97 S or 27% W 52% D 17% Dr 4% S. These children then give approximately twice as many D's as W's, 1.5 times as many W's as Dr's, and three times as many D's as Dr's. This group gives approximately one space answer on an average. From the table given by Davidson and Klopfer (5), 2.6 W is taken as the average for 8 year children by Kerr. This is considerably lower than the average of 7.35 in the present

*. The symbol S is generally employed for a normal space detail answer and s for a rare space detail. Because of the infrequency of the normal space detail in these records, S is used throughout.

study. According to present data, the ratio 1 W : 3 D considered so constant in older groups does not hold for the present 6 and 8 year old groups. For 6 years, it is rather 1 W : 1 D; for 8 years, 1 W : 2 D.

Stavrianos (24) studying sex differences reports 61% W and 53% W for boys and girls, respectively, ages 5 to 7 years. These norms are considerably higher than those obtained for the present 6 year group. Again for a group 7 to 9 years of age, 51% W (boys) and 44% W (girls) are given, results much higher than those obtained for the present 8 year group. Similarly, norms for % D in the two groups are considerably lower than those obtained here.

Comparison of norms of 6 and 8 year old children

Table 3 presents the comparison of the characteristic location categories of 6 and 8 year old groups, for each card and for the series as a whole with the differences and their significance as determined from Daniel's Table which enables one to estimate quickly statistically significant differences in observed percents (4, p. 827). A check is placed next to the difference which is significant.

Comparing 6 and 8 year old children, the latter give 14% less W's and 13% more D's than the former (total at the bottom of the table). These differences are reliable and hence it may be said with comparative certainty that 8 year old children give fewer whole responses and more detail responses than 6 year old children. It may also be observed in Table 3 that all the differences for % W and % D for each card as well as for the total are significant with the possible exception of % D in Card III. Klopfer and Margulies (18) likewise found W's decreasing with age and a corresponding increase in D's.

Comparison of the characteristic Modes of Mental Approach of different age groups

If the norms obtained for the younger age groups are compared with those employed for older children and adults, important observations may be made. It must be remembered, however, that differences must be viewed cautiously since norms depend on the nature of the scoring of D and Dr, the number and kind of subjects upon whom they are based, as well as the ages.

Table 4 presents the norms employed by different examiners. Taking the norms for 12-16 year old children as used at the Brush Foundation, one notes that 6 year children give more W and a higher % W, less D and a lower % D and a somewhat higher Dr and % Dr than the older children. More S is likewise given by the older group. The 8 year old children give only slightly more W than the older children, the % W falling within the normal range of the older group though toward the upper limit and the % D also within the normal range of the older group though toward the lower limit. A higher Dr and % Dr appear for the 8 year group. Again more S appears in the older group.

These observations are born out by the more specific comparisons which are made with data for 12 and 15 year groups, presented in Table 5. Since the same procedure of scoring was employed, and since the number and nature of the subjects are known, statistical comparisons may be made of these groups. It may be observed that 6 year children give reliably more % W and reliably less % D than 12 or 15 year old children. Where the 8 year children are compared with the 12 and 15 year groups, differences in % W and % D are not significant. It is of interest to note that no significant differences appear between 12 and 15 year groups in % W, % D, or % Dr.

Brush data indicate then:

a) Six year children give a reliably higher % W and a reliably lower % D than 8, 12, or 15 year children.

b) The characteristic modes of Mental Approach for 8, 12, and 15 year old children do not differ significantly.

It may be of interest to compare the Brush norms with those employed for adults, although the studies on which they are based are not strictly comparable because of differences in scoring and because of the lack of information as to the nature of the groups upon which adult norms are based. It may be seen in Table 4 that 6 year children give a higher % W and a lower % D than adults according to the Klopfer-Kelley norms; 8 year children give a % W and a % D which fall within the normal range for adults. This was likewise observed in comparing the younger groups with the Brush norms for pre-adolescent and adolescent children.

Comparing the younger groups with the Rorschach-Oberholzer norms for adults, 6 year children again give a higher % W and a lower % D than adults. Eight year children give a lower % D and a higher % Dr than adults. The little difference which appears in % W is in favor of the 8 year group.

Davidson and Klopfer (5) observe with one exception a consistent increase of W's with age, from 6 years on. This is not born out by present data. While six year children give a higher % W than 8, 12, or 15 year children, no reliable difference appears between the % W of 8, 12, or 15 year groups or adult groups.

Since there is reliable difference between the characteristic Manner of Mental Approach of 6 year children and older children, norms appropriate to this age group must be employed in interpreting the records of a 6 year old child. In the literature, frequent reference is made to overemphasis of W and under-emphasis of D in a 6 year old record. Strictly speaking, overemphasis of W for a 6 year old child is any percent over 41%, according to present norms. Similarly, underemphasis of D would be any percent under 39%. Thus a 6 year old child who gives 35% W and 40% D has a Manner of Mental Approach of (W) D. This child falls below the average for his group in % W although he is over the normal range for older children and adults. W is not overemphasized but rather underestimated. Again this child is underestimating the D's when he is compared to older children and adults, but falls within the normal range when compared with others in his own group, as he should be. Thus Stavrianos' discussion of the degree to which children over and under emphasize the various location categories in terms of Klopfer's adult norms must be restated (24, p. 171). Similarly, other interpretations of children's characteristic mental approach must be interpreted in terms of the appropriate norms.

Gestalt properties of the Rorschach Blots.

According to Rorschach, the blots in the test series have certain Gestalt qualities and fulfill certain special requirements. Many of those which he enumerated pertain to the Manner of Mental Approach. Thus Card I is easy to interpret as a whole and in detail. Card II contains a white intermediate figure which is sufficiently prominent to stimulate response. Card IV is more difficult to answer as a whole than in detail. Card V is the easiest form to interpret while Card VI is the most difficult. The "essential" part of Card VII is the white intermediate figure rather than the black figures.

Card VIII is easily interpreted at least in detail. Card IX has a definite intermediate figure and Card X has many disparate blots and whole answers are almost impossible (21, p. 47).

Those properties of the cards as enumerated by Rorschach may be examined to some extent in the two age groups studied. Returning to Table 2, the rank order of the total number of responses, the W's, D's, Dr's, and S's given, and of their percentage for each card and for each age group is presented.

It may be observed that Card X elicits most responses, Card III ranking next in frequency in both 6 and 8 year groups. Cards I, II, and VIII come next in frequency, then IV, VII, and IX although the exact rank order of each varies somewhat in the two groups. In both groups, the least number of responses are given to VI and V. Thus the following rank order may be taken for 6 and 8 year children:

Most frequent	X
	III
	I, II, VIII
	IV, VII, IX
	VI
Least frequent	V

It may be said, then, that with 6 and 8 year children, most responses are given to X and III, fewest to VI and V. Thus to the card considered the easiest, V, and the most difficult, VI, the fewest responses are given by these young children.

Whole responses

For the whole responses, the following rank order may be accepted for both age groups combined:

Most frequent	I
	IV, V
	III
	VI, VII
	II
	VIII
Least Frequent	X, IX

When the % W is considered, the rank order is slightly changed:

Most frequent	V
	I
	IV
	VI, VII, III
	II
	VIII
	IX
Least Frequent	X

It may be noted that Card V gives the highest % w, I and IV following in rank as compared to Card I which elicits the highest number of W's, IV and V following. Despite this slight variation, it may be concluded that Cards I, IV and V elicit the most W and the highest % W; Cards VIII, IX and X the least W and the lowest % W. This is in agreement with Rorschach's statement that Card I is easy to interpret as a whole. In the 6 year group, however, Card I receives a higher % W than percentage of detail answers (D+Dr) although in the older group, Rorschach is confirmed in that approximately as much % W as % (D+Dr) are given to Card I.

For the 6 year old group, Rorschach is not substantiated in his asser-

tion that Card IV is more difficult to answer as a whole than in detail. These children give 59% whole answers as compared to 41% detail answers (i.e. D+Dr+S). The 8 year old group, however, give 42% W as compared to 58% detail responses, confirming Rorschach. Again, while the present groups give many whole answers to Card X, (and Rorschach thought this impossible) Rorschach is confirmed in that the least number of whole responses is given to this card by both groups. Similarly, Card VIII elicits a lower % W than percentage of detail answers in both groups as Rorschach indicated.

If the frequency with which the blots elicit the various location categories is taken as an index of difficulty, the most frequent being the easiest to elicit and the least frequent the most difficult, the rank order in which these categories appear may be employed in judging their respective interpretive values in a record. Thus it may be said that in the records of 6 and 8 year old children, W's given to Cards V, IV and I are easier to give and bespeak less intellectual effort than those given to Cards IX, X and VIII. Similarly, whole responses given to these latter cards suggest a higher order of mental functioning than those given to the former. Of course, other qualitative factors must be taken into consideration in making such interpretations definite.

Normal details

The following rank order appears for the D in 6 and 8 year groups:

Most frequent	X
	III, II, VIII
	IX
	VI, VII
	I
	IV
Least Frequent	V

For the % D, the order becomes:

Most frequent	X
	IX
	VIII
	II
	III, VI, VII
	IV
	I
Least frequent	V

Card X appears to elicit the most D's and the highest % D in both groups. Cards V, IV and I are at the lowest end of the rank order for both D and % D. It may be concluded that in 6 and 8 year children, Card X is prone to elicit the most D's and the highest % D, Cards V, I, and IV the least number of D's and the lowest % D. Thus D's given to Cards V, I, and IV are relatively more difficult to give than are those given to Card X.

Rare Details

The highest numbers of rare details occur in Cards X and III for both age groups. For the younger group, Card IX elicits the lowest number, and for the older group, Card II. Differences in frequencies in this category, however, are less marked than for W and D. In the present data, all space details were rare according to the criterion adopted. Hence, by definition, % Dr + % S should approximate 20% for each card. Thus, the least % Dr is given to Card II

by both age groups because of the higher percentage of space answers elicited.

Space Details

The following rank order for space details appears for the two groups:

Most frequent II, IX, VII
I
Least frequent III, V, VI, VIII, IV, X

When the %S is considered, the most frequent again are in Cards II, IX and VII. These are the cards Rorschach indicated would elicit the highest number and percentage of space answers. It should be observed, however, that these space details do not attain normal ranking in either the 6 year or the 8 year groups. For these young children, then, the white intermediate figure in Card VII is not the "essential" part of the card, and the space detail in Card IX is not as "definite" as Rorschach supposed.

Interpretation

In attempting to describe the characteristic Manner of Mental Approach of children 6 and 8 years of age in psychological terms, it must be remembered that the interpretive values of the location categories depend in large measure on their qualitative features and on their various interrelationships with other patterns in the total personality picture (supra, pp.3,4). Despite the absence of information on these variable factors in the present paper, some broad generalizations may be attempted.

Children 6 years of age are prone to view wholes or large sub-wholes in a broad general manner without analysis or concentration on the many specific parts constituting the whole. As the Gestalt psychologists have indicated, the total configuration forms the basis for early perception rather than elements of the situation.

Further preliminary study of other Rorschach patterns to be reported in a later paper reveals many ordinary, vague, crude and inaccurate forms at the 6 yr.age level.Answers such as "man", "animal", "tree", "house", "bridge", "crab", "fly", etc. with little specification or elaboration were received with great frequency. Considering this in conjunction with the large number of W's, it may be said that the Rorschach W at this age still reflects to some extent the syncretistic type of perception described by Piaget (20) where the whole is reacted to and where little attention is given to the relationships between parts. Thus given an objective situation or problem, 6 year old children tend to react to it as a whole, viewing it broadly, often unanalytically and uncritically. Their reactions are free, easy and natural. Details in the situation cause no concern and offer little conflict. Children at this age see certain large, common and obvious features (D), however, so that their mental procedure starts to take on more mature patterns. Comparing present results with the observations of Klopfer and Margulies (18) for younger age groups, one would be inclined to say that by 6 years of age, children are passing out of the very early syncretic stage.

Since the space details represent the unusual aspects of the blots and, in selecting them, the individual frequently reverses the relation of figure and ground, they are taken to reflect an attitude of opposition, sometimes directed against self and sometimes against the world (Rorschach, 21, 22: Klopfer and Kelley, 17). Thus, depending upon the personality constellation in which this space detail appears, they reflect aggressiveness, negativism, self will,

doubt, indecision, and the like. Whatever be the trait, it either does not manifest itself at this age or it is represented by a lower S score.

With 8 year old children there is an increased tendency on occasion to analyze the whole into parts. It will be demonstrated in a later paper that there is considerable increase in the accuracy of the forms seen, also more differentiation and elaboration. Thus the approach of 8 year old children is more flexible. They pay closer attention to detail. They become more specific. They see the common and the important features in a situation and include them in their interpretations. Oppositional attitudes reflected by the space detail are still at a minimum.

Comparing the 6 and 8 year groups, it may be concluded that the reactions of the older children are more analytical. Six year children do not see the important features nor relationships seen by 8 year old children. Older children pay more attention to detail. They tend to react from the general to the more specific. There is also the suggestion that they exhibit more of the oppositional attitudes expressed by the Rorschach space detail.

Comparing these younger groups with pre-adolescent and adolescent children and adults, the characteristic manner of approaching objective situations changes little after 8 years of age. The tendency is to react to wholes and to the parts of an objective situation in a flexible manner. It is in the qualitative features of mental procedure that marked differences may be observed between younger and older children and adults. Subsequent studies will demonstrate greater accuracy, organization, complexity, originality, etc. of perceptual approach in older children and adults. Present data, for example, suggest that younger children not infrequently single out unimportant details and ignore their relationship to the rest of the situation (Dr). But it may be said that 8 year old children begin to react differently to various aspects of objective situations and thus show the beginnings of mature patterns of mental procedure.

Summary

A study is made of the characteristic Manner of Mental Approach of children 6 and 8 years of age to objective situations and problems as revealed by the location categories which are included in the Rorschach scoring classifications. A statistical study determined the details which may be considered normal and rare for these two age groups. These are listed and compared. They are offered as scoring criteria for the Rorschach records of groups of similar age, mental level, and cultural status.

Since the value of these location categories depends to some extent on their distribution in the series of blots, the propensities of the cards to elicit specific categories are systematically studied and outlined for the purposes of interpretation.

Norms are presented for the characteristic Manner of Mental Approach for 6 and 8 year old children. These are compared with those in use for older children and adults. Differences and similarities are translated into psychological terms and several interpretive values are tentatively offered until analysis of other Rorschach patterns will confirm or modify them.

Conclusions are offered that while 6 year old children grasp certain large, common and obvious features in objective situations, they more characteristically react to the whole, often unanalytically and uncritically.

Eight year old children likewise embrace the whole of a situation on occasion but they show ability to analyze it into its obvious and essential features. They show more capacity to react differentially to the different aspects of objective situations. It may be said that at least from 8 years on, children tend to become more analytical and more specific. At this age, the beginnings of mature patterns of mental procedure become evident. The characteristic manner of approaching problems and situations is little different in 8 year old children from that of older children or adults. In grasping and interpreting situations in the environment the 8 year old child reacts now to the whole, now to parts, and again to the whole as the occasion demands, just as the more mature person does. It will be demonstrated in later studies that differences between the child and the adult in perceptual approach are more qualitative in nature.

Table 1

Normal Details in the Rorschach Ink-blot as Statistically Determined from the Records of Six and Eight Year Old Children.

Card	Location Code	Description of Location	6 Years 242 Ss Frequency	Score	8 Years 208 Ss Frequency	Score	6 and 8 Years D
I	W	Whole	351	W	282	W	
	S	Side figure	30	D	39	D	D
	M	Center figure	29	D	34	D	D
	1	Claw projections, top	25	D	26	D	D
	2	Side projections	18	D	24	D	D
	21	Upper part of side figure	9	Dr	24	D	
	12	"Head" of side figure	14	Dr	20	D	
	3	Projections, middle bottom	15	Dr	17	D	
		Total D		4		7	4
II	W	Whole	187	W	108	W	
	3	Red figure, top	97	D	110	D	D
	4+4	Red figure, bottom	86	D	116	D	D
	5,5+5	Black side figures	67	D	93	D	D
	12	Black middle projection, top	22	Dr	49	D	
		Total D		3		4	3
III	W	Whole	53	W	37	W	
	W	Cut-off whole	189	W	162	W	
	5	Red "butterfly" center	146	D	132	D	D
	4	Red corner figure	95	D	129	D	D
	1,1+1	Bottom black, middle	34	D	45	D	D
	2	Side "leg" figure	27	Dr	62	D	
		Total D		3		4	3
IV	W	Whole	277	W	202	W	
	2	Middle projection, bottom	51	D	64	D	D
	4	Projection sides, "snakes"	28	D	40	D	D
	5	Top center "face"	22	D	21	Dr	
	3	Toe part of boot	17	Dr	23	D	
	1	"Foot" figure	17	Dr	51	D	
		Total D		3		4	2

Table 1 (cont'd.)

Card	Location Code	Description of Location	6 Years 242 Ss Frequency	Score	8 Years 208 Ss Frequency	Score	6 and 8 Years D
V	W	Whole	274	W	258	W	
	2	Projections, bottom,center	19	D	33	D	D
	C	Center figure, "rabbit"	19	D	12	Dr	
	1	"Head", top, center	14	Dr	21	D	
	S	Side figure	11	Dr	13	D	
	6	Side projection, "leg"	3	Dr	15	D	
		Total D		2		4	1
VI	W	Whole	198	W	142	W	
	S,S+S	Side or Lower two thirds	63	D	63	D	D
	1	Upper third, "head"	49	D	39	D	D
	18	Light projections of upper third	27	D	45	D	D
	C	Center line, top to bottom	24	D	18	D	D
	2	Large side projection	14	Dr	22	D	
		Total D		4		5	4
VII	W	Whole	215	W	132	W	
	1+2	Top plus middle third	62	D	76	D	D
	3+3	Bottom thirds	47	D	60	D	D
	6	Light gray, center bottom	30	D	15	Dr	
	1	Top third	24	D	39	D	D
	2	Middle third	14	Dr	56	D	
	12	Dark between bottom thirds	19	Dr	33	D	
		Total D		4		5	3
VIII	W	Whole	152	W	80	W	
	1	"Animal", sides	150	D	158	D	D
	2+5	Red and orange, bottom	64	D	77	D	D
	3+4	Blue and gray, top	35	D	33	D	D
	4,4+4	Gray top	22	Dr	51	D	
	3,3+3	Blue middle	10	Dr	23	D	
	5	Orange bottom	7	Dr	17	D	
	M	Entire middle figure	19	Dr	16	D	
		Total D		3		7	3
IX	W	Whole	131	W	64	W	
	1	Brown top figure	78	D	75	D	D
	2	Green middle	59	D	77	D	D
	3,3+3	Red bottom	51	D	82	D	D
	3+C+3	Red plus center	22	D	20	D	D
	5,5+ 4i	Claw projection from brown Long green center form	19 18	D Dr	43 28	D D	D
	13	Outer quarter of red, "head"	5	Dr	20	D	
	10	Green-brown"animal's head"	6	Dr	18	D	
		Total D		5		8	5
X	W	Whole	140	W	61	W	
	6	Blue, sides, "spiders"	121	D	110	D	D
	1+1	Pink figures+intervening	66	D	45	D	D
	3,3+3	Green middle bottom / parts	65	D	101	D	D
	9,9+9	Gray, top center	59	D	82	D	D
	4	Gray at sides	49	D	67	D	D
	7	Yellow, middle bottom	43	D	52	D	D
	10	Yellow, sides	39	D	37	Dr	
	12or20	Green"rabbit face"or"man"	35	D	50	D	D
	5	Blue, middle / reversed	29	Dr	43	D	
		Total D		8		8	7
		Total D's for 10 cards		39		52	35

Table 2

Table 2

The Total Number, Percentage, and Average of the Location Categories in the Rorschach Records of 6 and 8 Year Old Children Showing the Rank Order of the Different Frequencies.

6 years N = 242

Card	R	Rank	W	Rank	%W	Rank	D	Rank	%D	Rank	Dr	Rank	%Dr	Rank	S	Rank	%S	Rank
I	560	3	351	1	63%	2	102	8	18%	9	87	4	16%	6-7-8	20	4	04%	4
II	549	4	187	7	34%	7	250	3	46%	4	78	8	14%	10	34	1	06%	1
III	645	2	242*	4	38%	6	275	2	43%	5	122	2	19%	2-3-4	6	6-7	01%	5-6-7-8
IV	466	7	277	2	59%	3	101	9	22%	8	86	5	18%	5	2	9-10	00%	9-10
V	393	10	274	3	70%	1	38	10	10%	10	79	6-7	20%	1	2	9-10	01%	5-6-7-8
VI	439	9	198	6	45%	4-5	163	6-7	37%	6	72	9	16%	6-7-8	6	6-7	01%	5-6-7-8
VII	482	6	215	5	45%	4-5	163	6-7	34%	7	79	6-7	16%	6-7-8	25	2	05%	2-3
VIII	506	5	152	8	30%	8	249	4	49%	3	98	3	19%	2-3-4	7	5	01%	5-6-7-8
IX	453	8	131	10	29%	9	229	5	51%	2	69	10	15%	9	24	3	05%	2-3
X	764	1	140	9	18%	10	477	1	62%	1	144	1	19%	2-3-4	3	8	00%	9-10
Total	5257		2167		41%		2047		39%		914		17%		129		02%	
Aver.	21.72		8.95				8.46				3.78				0.53			

8 years N - 208

Card	R		W		%W		D		%D		Dr		%Dr		S		%S	
I	575	5	282	1	49%	2	183	8	32%	9	84	6	15%	7-8	26	4	05%	4
II	595	3	108	7	18%	7	368	3-4	62%	4	65	10	11%	10	54	1	09%	1-2
III	702	2	199*	4	28%	5	368	3-4	52%	5-6	124	2	18%	6	11	6	02%	5-6-7
IV	481	8	202	3	42%	3	178	9	37%	8	98	4	20%	3	3	8-9	01%	8
V	424	10	258	2	61%	1	82	10	19%	10	82	7	19%	4-5	2	10	00%	9-10
VI	427	9	142	5	33%	4	187	7	44%	7	89	5	21%	2	9	7	02%	5-6-7
VII	504	7	132	6	26%	6	264	6	52%	5-6	76	8	15%	7-8	32	3	06%	3
VIII	576	4	80	8	14%	8	375	2	65%	3	109	3	19%	4-5	12	5	02%	5-6-7
IX	546	6	64	9	12%	9	363	5	66%	2	69	9	13%	9	50	2	09%	1-2
X	783	1	61	10	08%	10	550	1	70%	1	169	1	22%	1	3	8-9	00%	9-10
Total	5613		1528		27%		2918		52%		965		17%		202		04%	
Aver.	26.99		7.35				14.03				4.64				0.97			

* Includes both W and W^x.

Table 3

Comparison of the Characteristic Modes of Mental Approach of 6 and 8 year Old Children as Determined From Rorschach Record.

Card	Age Group	%W	Diff.	*	Signif.	%D	Diff.	*	Signif.	%Dr	Diff.	*	%S	Diff.
I	6 yrs.	63				18				16			04	
	8 yrs.	49				32				15			05	
			14	6 yrs.	✓		14	8 yrs.	✓		01			01
II	6 yrs.	31				46				17			06	
	8 yrs.	18				56				17			09	
			13	6 yrs.	✓		10	8 yrs.	✓		--			03
III	6 yrs.	36				45				18			01	
	8 yrs.	28				50				20			02	
			08	6 yrs.	✓		05	8 yrs.	?		02			01
IV	6 yrs.	59				22				18			00	
	8 yrs.	42				37				20			01	
			17	6 yrs.	✓		15	8 yrs.	✓		02			01
V	6 yrs.	70				10				20			01	
	8 yrs.	61				19				19			00	
			09	6 yrs.	✓		09	8 yrs.	✓		01			01
VI	6 yrs.	45				37				16			01	
	8 yrs.	33				44				21			02	
			12	6 yrs.	✓		07	8 yrs.	✓		05			01
VII	6 yrs.	45				34				16			05	
	8 yrs.	26				52				15			06	
			19	6 yrs.	✓		18	8 yrs.	✓		01			01
VIII	6 yrs.	30				49				19			01	
	8 yrs.	13				68				16			02	
			17	6 yrs.	✓		19	8 yrs.	✓		03			01
IX	6 yrs.	29				51				15			05	
	8 yrs.	12				66				13			09	
			17	6 yrs.	✓		15	8 yrs.	✓		02			04
X	6 yrs.	18				62				20			00	
	8 yrs.	08				73				19			00	
			10	6 yrs.	✓		11	8 yrs.	✓		01			--
Total	6 yrs.	41				39				18			02	
	8 yrs.	27				52				17			04	
			14	6 yrs.	✓		13	8 yrs.	✓		01			02

6 yr. Group N - 242
8 yr. group N - 208

* - in favor of
✓ - significant according to Daniel's Table (4)

6 yr. Group N - 242
8 yr. group N - 208

* - in favor of
✓ - significant according to Daniel's Table (4)

Table 4

Comparison of the Characteristic Modes of Mental Approach

of Different Age Groups.

Investigator	Age	N	W	%W	D	%D	Dr	%Dr	S	%S
Hertz-Ebert	6 yrs.	242	8.95	41%	8.46	39%	3.78	17%	0.53	02%
Klopfer	5-6 yrs.	16	7.9		10		1.0		0.6	
Hertz-Ebert	8 yrs.	208	7.35	27%	14.03	52%	4.64	17%	0.97	04%
Klopfer	7-8 yrs.	16	8.3		6		.4		.4	
Kerr	8 yrs.	?	2.6							
Hertz	12 yrs.	92	9.36	29%	19.14	51%	5.53	13%	1.79#	05%#
Hertz	15 yrs.	92	7.38	25%	21.00	56%	6.62	14%	1.55#	04%#
Hertz	12-16 yrs.	300		20-30		50-60		5-15		2-5
	12,6-16,6 yrs.	300	6.78		14.08		1.93		1.73	
Klopfer-Kelley	adults	?		20-30		45-55				
Rorschach-Oberholzer	adults	?		24%		71%		03%		02%

- Median

Table 5

Comparison of the Characteristic Modes of Mental Approach of 6, 8, 12, and 15 year Old Children.

Age	N	%W	% Diff.	*	Signif.	%D	% Diff.	*	Signif.	%Dr	% Diff.	*	Signif.	%S	% Diff.	*
6 Yrs.	242	41				39				18				02		
8 Yrs.	208	27				52				17				04		
			14	6 yrs.	✓		13	8 yrs.	✓		01				02	8 yrs.
6 Yrs.	242	41				39				18				02		
12 Yrs.	92	29				51				13				05#		
			12	6 yrs.	✓		12	12 yrs.	✓		05	6 yrs.			03	12 yrs.
6 Yrs.	242	41				39				18				02		
15 Yrs.	92	25				57				14				04#		
			16	6 yrs.	✓		18	15 yrs.	✓		04	6 yrs			02	15 yrs.
8 Yrs.	208	27				52				17				04		
12 Yrs.	92	29				51				13				05#		
			02	12 yrs.			01	8 yrs.			04	8 yrs.			01	12 yrs.
8 Yrs.	208	27				52				17				04		
15 Yrs.	92	25				57				14				04#		
			02	8 yrs.			05	15 yrs.			03	8 yrs.			--	
12 Yrs.	92	29				51				13				05#		
15 Yrs.	92	25				57				14				04#		
			04	12 yrs.			06	15 yrs.			01	15 yrs.			01	12 yrs.

* in favor of
\# median used
✓ significant according to Daniel's Table (4, p.827).

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RORSCHACH CHARACTERISTICS OF A GROUP OF VERY SUPERIOR SEVEN YEAR OLD CHILDREN*

Mollie Gair, M.S.**

Purpose of the Study

This is a preliminary study of a group of seven year old children of very superior intelligence, to show how the Rorschach patterns of these children compare with Rorschach patterns of a more average group of children between seven and eleven.

Subjects used

The whole second year group of the Hunter College Elementary School for Gifted Children served as subjects for this study. The group consisted of twenty-one girls and eight boys. All of them had been given the Revised Stanford-Binet, form L, before they entered school. The chronological age and intelligence test results for the group are as follows:

	Range	Average
C.A.	7-1 to 7-6	7-3.
M.A.	9-11 to 12-8	10-8
I.Q.	135-174	146.

The investigation

The Rorschach was administered individually to the twenty-nine children, at the completion of their second school year. It was not necessary to vary the standard directions for administration of the Rorschach in any way.(3) The directions for the performance, inquiry and testing the limits were followed as for adults. The children adjusted easily to the test situation and enjoyed the experience with the ink blots.

At about the same time that the Rorschach was given them, the children were all ranked by the teacher in order of maturity, from 1 to 29. For the purposes of this study, the children were divided on the basis of the ranking into three maturity groups: those rated 1 to 10 were classified as most mature, the next 10 as moderately mature, and the remaining 9 as least mature.

A questionnaire sent to the parents showed that about 70% of the fathers and 60% of the mothers hold college or university degrees. Approximately 50% of the parents are professionals and about 50% of the mothers hold part-time or full-time jobs. Fifteen children have one older or younger brother or sister, the rest have no siblings.

The Results

The Rorschach material is arranged in tables of Location, Determinants and Content. These will be compared with Stavrianos Study (4) to determine in what respect the Rorschach patterns of very superior seven year old children are similar to Rorschach patterns of children between seven and eleven years of age, who mentally represent a more average group.

* This study was made possible through the cooperation of Dr. Florence Brumbaugh, Principal, and of the parents of Group VII of Hunter College Elementary School.

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In addition, the adjustment of the group as indicated by the Rorschach will be compared with the adjustment signs used by Davidson (1) and with the teacher's estimates of maturity.

Mental Approach

An analysis of the location of responses as used by very superior seven year old children is shown in Table I. In this table the average number of responses and the mean percentages for the W, D, d, Dd and S locations used by the group are compared with Stavrianos study (5).

Table I

LOCATION OF RESPONSES

	Av.Age	Av.No. of Responses	W Av.No.	W Av.%	D Av.No.	D Av.%	d Av.No.	d Av.%	Dd Av.No.	Dd Av.%	S Av.No.	S Av.%
	7-3	15.1	7.7	50.8	6.4	42.6	.7	4.6	.2	2	.1	1
Stav-	7:1-8:0	13.3	5.4	41.0	6.6	50.0	.7	5.	.5	4	.2	2
rianos	8:1-9:0	13.5	5.9	44.0	6.0	44.0	1.0	7.	.5	4	.1	1
	9:1-10:0	19.9	5.6	28.0	10.3	52.0	1.7	9.	2.6	13	.2	1
	10:1-11:0	14.0	5.9	42.0	7.3	52.0	.4	3.	.4	3	0	0

These figures indicate that the mental approach of very superior seven year old children is above their chronological age. According to Stavrianos study (2) the number of responses given by the superior children is greater than the 8-9 year group. The percentage of W's is larger, and the percentage of D's and Dd's is less than for any of Stavrianos groups. There is no significant difference in S and no change that can be easily interpreted for d.

The superior children use more W's and less D's than do the children in Stavrianos study. However, the majority of these W's are of superior quality, and the large number of additional D's given by the superior children (about 60% of the additional responses are D's results in a better intellectual picture.

Determinants of Responses

An analysis of the responses based on Rorschach determinants is summarized in Table II. The mean percentage of determinants used is compared with Stavrianos results (4).

Table II

MEAN PERCENTAGE OF RESPONSES BASED ON EACH OF RORSCHACH DETERMINANTS

	Av. Age	M	FM	m	K	FK	F	Fc	C'	FC	CF	C
	7-3	10	23		3	.9	41	4	2	9	.8	0
Stav-	7:0-9:0	5.8	24.3	1.0			47.3			7.	4.5	2.5
rianos	9:0-11:0	10	22.5	2.0			45.0			6.5	3.5	1.0

The above data indicate that the intellectual development of very superior seven year olds is above their chronological age. According to Stavrianos study (1), the M percentage of this group falls in the 9-11 group, and is distinctly above the percentage of M given by the younger Stavrianos group. The FM percentage of this group is closer to the 9-11 group, but the age trend here is slight. The F% shows greater maturity than either the 7-9 or the 9-11 group, as would be expected from the freer use of other determinants.

Stavrianos found the percentages of K, FK, c, C' too small to include them in her tables. The percentages for these determinants in our group range from .9% to 4%, which seems to indicate that superior seven year old children are stimulated by the shaded cards and give both diffused and differentiated shaded responses. The percentage of m and c responses were below .5% and were not included in the table.

The FC% of this group is above both the 7-9 and 9-11 groups and the absence of pure C also shows greater development of control. The significance of the increase of CF, however is not clear. It may be due to a shift from pure C to CF, but on the other hand it may indicate greater impulsiveness among very superior children. This may imply a slower pace in emotional development than in intellectual growth, which seems to be consistent with the findings of psychological studies of child development. Hollingworth (2) states that:

> "As children develop toward adulthood they gradually mature in emotional control, just as they do in intellectual ability .....the degree of emotional control does not, however, necessarily run parallel to the degree of intellectual ability in a given child, so that the 'emotional age' of an individual may vary widely from his 'intellectual age'."

Content of Responses

In Table III the percentage of responses for content categories which were used by very superior seven year old children is compared with the content categories in the Stavrianos study (4).

Table III

PERCENTAGE OF RESPONSES FOR CONTENT CATEGORIES

	Av. Age	H	Hd	A	Ad	Aobj	At	AAt	obj	N	Pl	Cl	Bl	Fire	Art
	7-3	10	7	42	6	3	3	.2	10	4	4	2	1	2	4
Stav-	7:0-9:0	6	6	43.3	6	1.3	1.3	1.3	8.3	1.8					
rianos	9:0-11:0	11.5	5	47.5	9	3.5	.5	1.0	7.5	4.0					

Analysis of Table III indicates a trend in the direction of maturity on the part of the superior group. Their H% is above that of the Stavrianos 7-9 group and closer to her 9-11 group. The total number of content categories used by the superior group is 24. The categories which were used for less than 1% of the responses were not listed in the table. Among these were geography, water, food, and abstract references. Thus very superior children have a wider range of interests than average children between 7 and 11 years.

Adjustment of the group

Table IV shows the relationship between Adjustment Signs used by Davidson (1) and maturity of the children as based on teachers' estimates. The table is arranged in 4 double columns, representing the data for each maturity sub-group and for the total group of 29 children. Davidson's designations of the adjustment signs are shown on the left. The first column of each double column shows the numerical value of the Rorschach characteristics denoted by each sign. The second column of each double column represents the percentage of cases in each group who show each sign as defined by Davidson.

Table IV

THE RELATIONSHIP BETWEEN THE TEACHER'S ESTIMATE OF MATURITY AND THE ADJUSTMENT SIGNS USED BY DAVIDSON*

Adjustment Signs	Most Mature n-10		Moderately mature N-10		Least Mature n-9		Total Group N-29	
	Av.	%	Av.	%	Av.	%	Av.	%
1. M > FM or M = FM	1:2	20	1:1.5	20	1:1.3	22.2	1:2	20.7
2. Sum C > Fc+c+C'	4:1	90	2:1	60	2:1	77.7	1.4:1	72.4
3. F% = 50% or less	37	70	48	40	40	66.6	41	58.9
4. Dd+S = 10% or less	3	90	2	90	1	100.	3	93.1
5. P = 4 or more (and less than 30%)	4	50	2.7	40	2	0	3.3	31.0
6. R > 20	20	40	12	0	11	11.0	15.1	17.2
7. FC > CF or FC = CF	1.3:1	60	1.3:1	50	1:1.6	33.3	1:1	48.3
8. No Pure C	0	100	0	100	0	100	0	100
9. % last 3 cards = 40% or over	40	40	37	30	29	22.2	37	31.0
10. A% < 50	38	40	48	50	38	77.7	47	55.2

*Davidson applied 17 signs to a group of very bright children between the ages of 9-14 years, to determine the degree of adjustment. She found the mean number of adjustment signs to be 10.31. The complete list of signs will be given at the end of this report.

Of the ten adjustment signs studied, the first, M = FM, does not appear to be applicable to our group. This is not surprising in view of the fact that a predominance of FM over M is considered normal for this age, and in fact for any age up to puberty (3, p. 250). Only about 20% of the total group show this sign, and comparison of the three sub-groups shows no relationship to estimated maturity within the total group.

The remaining 9 signs, however, show a number of interesting trends. In the first place, when average figures are considered, the group as a whole shows six of the nine signs. These are $\Sigma C > Fc+c+C'$, $F\% \leq 50\%$, $Dd+S \leq 10\%$ $FC \geq CF$, absence of C, and $A\% < 50\%$. Moreover, a somewhat different constellation of five signs all show a trend in the expected direction in differentiating the three maturity groups. These are $\Sigma C > Fc+c+C'$, P, R, $FC \leq CF$, and percentage of responses to the last three cards.

When the comparisons of the three maturity groups are based on percentages of cases which show given signs, we find that three of the signs, namely, P, FC = CF, and percentage of responses to the last three cards, show the expected trend clearly. These three seem to differentiate the three maturity groups most reliably, since they show the expected trend when averages as well as when percentages are considered. Three additional percentage signs, namely $\Sigma C > Fc+c+C'$, F%, R, occur more frequently in the most mature groups than in the other two groups, but fail to show a consistent trend for all three maturity groups.

In general it can be said that the Rorschach patterns of superior children of this age are related to maturity as estimated by the teacher, and that the group as a whole appears to be well adjusted.

Summary

The small number of subjects in this group makes it impossible to draw any definite statistical conclusions. We can only indicate certain trends implied in the data.

1. The number of responses given by very superior seven-year old children is above the expectation for their chronological age.

2. The group gave more W and fewer D responses than average children of the same and somewhat higher ages.

3. Analysis of the determinants showed greater maturity in the use of F%, M, and FC, but also an increase in CF. It was suggested that possibly the emotional development of superior seven-year old children does not keep pace with their intellectual development.

4. The content of the children's responses showed a wider range of interests than shown by average children.

5. A study of selected adjustment signs showed the group as a whole to be well adjusted. Moreover, the pattern of responses was shown to be related to maturity as judged by the teacher.

6. Further qualitative treatment of the material, and additional Rorschach records of very superior seven-year old children, are both necessary in order to make these findings more conclusive.

Appendix

ADJUSTMENT SIGNS USED BY DAVIDSON

1. M > FM or M = FM means that the number of M responses (human movement) is at least equal to or greater than the FM responses (animal movement). Normal, intelligent, well-adjusted individuals usually have more M than FM responses.

2. M, 3 or more (including additional M responses) means that the number of M responses including those given additionally should be at least three. Three or more M responses are expected from a normal intelligent adult.

3. Sum C > Fc+c+C' means that the value of the responses to the bright colors (½ number of FC + number of CF + 1½ number of C) is larger than the number of responses to the achromatic colors (gray, black, and white) plus responses using shading as texture. An individual adjusted to his surroundings will have more bright color responses than texture and achromatic color responses; those fearful of external situations, will want to play safe and retreat to the achromatic colors and shading. These people may as a result, appear outwardly adjusted but have inner conflicts.

4. F%, 50 or less means that the number of responses in which only the outline of the blot is used comprises half the entire number of responses or less. An individual with a satisfactory degree of rational control and, at the same time, a sufficient degree of spontaneity gives about 20 to 50% F responses of the total number of responses.

5. Dd + S, 10% or less means that the number of responses in which a rare detail or white space is used is less than 10% of the total number of responses. More than 10% rare detail answers may represent anxiety or an inability to see the things most people attend to.

6. P, 4 or more (and less than 30%). It is expected that normal, healthy individuals give at least four popular responses but not more than 30% of his total responses. P responses indicate the ability to think along the lines of other people which is essential even of very intelligent individuals if they are to be considered adjusted.

7. R, more than 20 means that the total number of responses is more than twenty. Normal, intelligent adults rarely give fewer than 20 responses.

8. FC > CF or FC = CF means that the number of FC responses (form with bright color) is either equal to or greater than the number of CF responses (bright color with indefinite form). A well-adjusted individual usually has more FC than CF responses.

9. FC, 2 or more indicates some capacity to make adequate social adjustments. From a normal individual at least two FC responses are expected.

10. No pure C means that a normal adjusted individual does not usually give color responses which disregard form and content completely.

11. %age to last three cards, 40% or over means that the number of responses to the last three cards is approximately 40% or more (up to 60%) the total number of responses. A socially well-adjusted individual is stimulated as much by the three colored cards as he is by the other cards and, there-

fore, should give approximately one-third of his responses to these cards. However, 40% instead of 30% is used because the possibility of seeing details in the last three cards is greater.

12. FK + Fc, 2 or more means that a healthy, intelligent individual gives at least two responses involving the use of shading in a controlled manner. These answers represent tact and ability to introspect.

13. W: M = 2:1 means that the optimum relation between whole responses and human movement responses is two to one. This is an index of productivity in relation to creative ability.

14. A% less than 50 means that the number of animal responses (A + Ad) does not exceed 50% of the total number of responses. Too many animal responses indicate stereotypy in thinking.

15. No color shock means that there are no signs in the Rorschach of color shock which may indicate a neurotic make-up.

16. No shading shock means that there are no signs of shading shock.

17. No refusals means that at least one response is given to each of the ten cards during the performance. Normal individuals are expected to see something on each of the cards.

References

(1) Davidson, H.H. Personality & Economic Background, King's Crown Press, 1943; 87-91, 94, 107.

(2) Hollingworth, L. Gifted Children, Their Nature and Nurture, MacMillan, 1926; p. 128.

(3) Klopfer & Kelley The Rorschach Technique, World Book Co., 1942; 29-58, 250.

(4) Stavrianos, B. An Investigation of Sex Differences in Children as Revealed by the Rorschach Method, Rorschach Res. Ex., 1942, 4, 168-175.

(5) Stavrianos, B. Supplement to above. Rorschach Res. Exch., 1943, p. 78.

NOTES AND REVIEWS

STAUDER, K. H. KONSTITUTION UND WESENANDERUNG DER EPILEPTIKER. GEORGE THIEME, LEIPZIG, 1938. pp. 196.

Louise Collins, Ph.D.

Stauder's aim in writing this book was to present his theories of the origin and development of various types of epilepsy. He feels that earlier writers, basing their findings largely on studies of brain anatomy, have treated the problems of the origin of the disease and of the effect of epilepsy on personality very inadequately. The use of the Rorschach method is introduced in order to put the study of the personality of epileptics on a more objective basis: but, although he uses the method very extensively, actually the Rorschach data are incidental to his main interest, which is the study of epilepsy.

The Rorschach material is dealt with in the first section of the book, devoted to experimental results. Stauder begins with a discussion of the method. In general, he apparently follows Rorschach's own procedure of administration and scoring, although his scoring procedures are not described in detail. However, many controversial points are raised in the matter of interpretation. For example, he feels that Bleuler credits environmental influences with too much effect on responses to the cards; he minimizes the importance of shading and of vista responses because he found few instances of these in his data; and his interpretation of white space responses is radically different from the interpretations generally assigned to them. For Stauder, these responses are signs of mental flexibility, adaptability, and intelligence. He also objects to the concept of color shock; he found color shock in very few of his records, and then only in the records of those subjects who had little interest in color. But his most active aversion, expressed in quite unmeasured terms, is for the concepts of the psychoanalytic school, and for the use of these concepts in Rorschach interpretations. He considers psychoanalytic concepts "unscientific", and deplores the fact that Rorschach himself seemed to adopt them as an aid in the interpretation of the ink blot material.* There is a brief summary of Rorschach's data on epileptics. Stauder feels that the sampling of 20 cases on which the data was based is entirely too small to be representative.

With this introduction, Stauder gives an account of his own data. The Rorschach material from which the records of epileptics were selected constitute what he claims to be the largest number of protocols yet collected, namely 2215 records of 1780 individuals. Normal and abnormal controls for the epileptics were included in this mass of material. The epileptics were largely patients from his own clinic at the University of Munich, some older patients from a private sanatorium, and a group of epileptic children, apparently private patients. The data on epileptics were collected over a 5 year period, and included two series of cases. The first was a preliminary group of 78 subjects. These were

*Editorial comment: Stauder's attitude toward psychoanalysis is more easily understood if one remembers that the book was published in Nazi Germany in 1938. His occasional concessions to "racial psychology" are further evidence of Nazi influence.

eventually incorporated into his final group of 500 epileptics. Of these, 358 were idiopathic, 74 were traumatic, 34 were residuals, and the remaining 34 were other symptomatic cases.

Of the 358 idiopathic cases, 222 presented what Stauder calls the "full" epileptic Rorschach pattern or typical epileptic syndrome. Perseveration is the distinguishing characteristic of the syndrome, and is taken to be the sole determinant of all responses. He gives figures of 90% and 100% perseveration, and cites illustrative cases, but does not explain in detail just how perseveration is scored. This is to be regretted, since no other author reports such extreme figures. About 1/4 of the traumatics, 1/3 of the other symptomatic cases, and only two of the residuals exhibit the same syndrome, but he cites several case studies to prove that these patients were in reality idiopathic epileptics who had been incorrectly diagnosed as symptomatic. The remaining 136 constitutional or idiopathic cases furnish material for what Stauder terms the "abortive" syndrome. This syndrome includes long response time, few responses, low F+%, a W approach with few D's and no Dd's, few good originals, as A% which is usually too high, rigid orderliness, and a constricted experience balance with usually no M and few color responses. Color naming, which he apparently classifies with the other color responses, figures disproportionately in the total color score. He then analyses five subsidiary factors, namely perseveration, pedantry, symmetry-noting, evaluative comments, and egocentricity. He feels that perseveration is present here also, and to a greater extent than in any other disorder, but it does not occupy the central position it does in the full epileptic syndrome.

A study of the effects of the duration of the disorder (or, more properly, of the number of convulsions), and of the number and variety of symptoms shown, leads to a discussion of the causation of epileptic dementia and of its relation to personality change. From the results on the two groups of idiopathic epileptics with their full and abortive Rorschach syndromes, and from the comparison of these findings with those on several symptomatic groups, Stauder deduces his major theses of personality change in epilepsy. His conclusions can be summarised as follows:

1. Idiopathic epilepsy is of constitutional origin. Personality change is invariably associated with it, and is rooted in the underlying constitutional factors.

2. Personality change does not occur in symptomatic epilepsy.

3. The intensity of the constitutional trend, plus the influence of auxilliary clinical factors, determine the progress of personality change.

4. Two types of Rorschach syndromes, the full and the abortive, can be differentiated. Perserveration (and this is the best substantiated part of his findings) is the central feature of the full epileptic syndrome. The abortive syndrome is less marked by perseveration. The syndrome is also found in all patients in the confused post-convulsive state.

5. Epileptic dementia is a secondary symptom, and is dependent on the number of seizures.

The second section of the book contains the clinical material and a long chapter on the hereditary factors in epilepsy. Two of the clinical findings deserve special mention. In a research on drugs, luminal was found to increase the perseverative trend in the Rorschach records of the patients. Secondly, when the patients were classified according to Kretchmer's body types, the "epileptic constitution" was found more frequently among those with the athletic build.

Stauder describes three types of epilepsy, genuine or idiopathic, constitutional-exogenous, and symptomatic. He develops more fully his earlier statement that many so-called symptomatic cases are actually idiopathic, the disease being precipitated but not caused by an auxiliary factor such as trauma.* True symptomatic cases, which lack the fundamental constitution, never show personality effects on the Rorschach. The old-type epileptic picture of an explosive, irritable, emotional character is attributed only to certain symptomatic epileptics, particularly the residuals.

Stauder closes with a chapter on diagnosis, pointing out the difficulty of applying general findings to the individual cases, and emphasizing the need of expert neurological and psycho-pathological knowledge. There is a bibliography of several pages, practically all from Swiss and German sources. There are no references to the Rorschach publications of English or American authors.

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* A similar point is brought out by W.G. Lennox in his Science and Seizures (Harper and Brothers, New York, 1941): "Probably those who have seizures as a complication of some injury or illness already had a predisposition to epilepsy (cerebral dysrhythmia) but actual epilepsy would not have occurred if the illness or injury had not intervened."

SOME SUGGESTIONS ON THE USE OF CONTENT SYMBOLISM

Zoltan Jacob*

While working on the Rorschach records of a small group of stutterers, all of them college students, the writer noticed the prevalence of certain specific content references. This led to a search of other instances of the use of content in a characteristic or consistent manner. The resulting observations are presented in the belief that further study of content symbolism may be an aid to both Rorschach diagnosis and Rorschach theory.

I. Six of the twelve stutterers whose records were studied used content references which may be described as uro-genital. These references took three forms. An undisguised reference to uro-genital functions, "people urinating in a urinal", occurred in one record. Four subjects saw "kidneys" on cards II, III, VII, and X respectively. Finally, a response interpreted by the writer as an intellectualised uro-genital response was given by the sixth subject. He saw "a canal...the way the water gets through...a controlled amount of water" on card VII. The Rorschach records of the last five subjects mentioned were characterised by infantile adaptation.

Yet another stutterer, who gave no urogenital responses, reported water in connection with animal movement on cards VII and VIII, and also showed an emphasis on the mouths of insects on cards III and VII. Three who gave no responses which could be interpreted as uro-genital all reported a history of enuresis, two of them up to the pre-pubertal period.

Thus nine of the twelve stutterers whose Rorschach records were studied either gave uro-genital references or had a history of enuresis. These results, although based on very few cases, seem suggestive, especially in the light of certain psychoanalytical interpretations. Enuresis, psycho-

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*U.S. Army.

analytically interpreted as urethral eroticism, is mentioned by several writers as associated with stuttering. The whole problem of infantile modes of adjustment on the part of these persons as postulated by psychoanalysis could be made the subject of a more extensive study by the Rorschach method. Moreover, the fact that uro-genital references tended to occur in the records of stutterers whose Rorschach patterns showed certain other common charactertistics suggests that the study of content symbolism may lead to a better understanding of personality constellations in different groups of stutterers.

II. Attitudes to black, and eye and mask references. Without making a statistical study of the frequency of this occurrence, the writer noticed that references to masks and to eyes tended to occur in records of subjects who either use C' as a determinant or show some evidence of black shock. These are subjects who tend to withdraw from emotional reality. For them, masks - also shields and emblems - may well represent a "front" erected in meeting reality, and as a protection against it. Eyes may represent a watchful awareness: either the paranoid-like feeling of being watched, or guilt feelings. If eyes and masks can be shown to have this type of significance for these subjects, the association between these two types of content and C' would be understandable.

The next step would be a statistical study of the frequency with which these content references appear in association with C'. Even more important would be a qualitative analysis of the records to determine the meaning to the patients of such a combination.

A NOTE ON RORSCHACH PRE-HISTORY

Saul Rosenzweig, Ph.D.*

In the course of bookshop browsing there recently came to the writer's attention an attractive juvenile which, as not infrequently happens to those who have learned to take fantasy seriously, at once appeared to have a professional aspect. The book bore the title "Gobolinks or Shadow-Pictures for Young and Old" and was by Ruth McEnery Stuart and Albert Bigelow Paine. It was published in New York by the Century Company in 1896. (A few Gobolinks by the same writer also appeared in St. Nicholas in and after that same year.) The first glance revealed that here was an extremely early use of ink-blots as a basis for inducing fantasy and that it probably resembled the "Kleksographien" of Justinus Kerner, published in Germany in 1857, in its historical interest.

"Gobolinks" is presented not only as a book for the amusement of the ageless child-mind but also as a game the playing of which by the authors gave rise to their published work. The short introduction explains how the game may be played and includes instructions for making the symmetrical ink-blots as well as for the manner in which the rhymes are to be written for the pictures seen. The main part of the text contains approximately one hundred such blots, reproduced in black and white and accompanied by a descriptive stanza. For example, the verses accompanying the second blot shown (two human-like figures confronting each other as if they have just stopped their onward rush in time to prevent a collision) are as follows:

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* Western State Psychiatric Hospital and University of Pittsburgh

THE SOMETHINGS

A Something met a Something
In the mists of Shadowland.
They ran against each other,
And came quickly to a stand.

"And who are you?" said Something One.
And Something Two, said he,
"That's just the very question that
At once occurred to me."

The blots lend themselves fairly readily to Rorschach scoring but the prospective interpreter would be at something of a loss to draw biographical conclusions because of the book's joint authorship. Nevertheless, the extremely high frequency of movement responses (75% M + FM, of which well over 50% are M) in this imaginative work lends some degree of general validation to the capacity for creative fantasy which the M type of response is supposed to signify.

The chief interest of the book lies obviously in its historical anticipation of the Rorschach method. Herman Rorschach was 12 years old when "Gobolinks" appeared. Binet and Henri[1] in 1895 quite casually pointed out the possible use of ink-blots as a test of individual differences in imagination. It is rather remarkable that during that same year, if not earlier, Stuart and Paine were at work on a book which deals exclusively with the subject of ink-blots and provides--though not, of course, in any professional sense--an excellent demonstration of psychological possibilities.

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1. L'Annee Psychologique, 1895, 2, p. 444.

ANNOUNCEMENTS

I. FIFTH ANNUAL MEETING OF THE RORSCHACH INSTITUTE, MAY 13, 1944.

1. With due considerations for war time travel restrictions, the executive committee decided to set as the date for the annual meeting, the Saturday preceding the meeting of the American Psychiatric Association in Philadelphia and to limit the program of the annual meeting to the following schedule:

Time, Saturday, May 13, 1944.

Place, Teachers College, Columbia University, 525 West 120th Street, New York, N. Y.

3:30 P. M. Executive Committee meeting.
5:00 P. M. Annual business meeting.
6:30 P. M. Dinner meeting.
8:00 P. M. Presidential address.

Dr. Harrower-Erickson will review new developments in the large scale application of the Rorschach method.

2. The following day, Sunday, May 14, 1944, a closed meeting (by invitation only) will be held for Rorschach workers in the armed services and government agencies, civilian Rorschach workers connected with war projects, and specialists in the armed services interested in such projects.

3. Proposed amendment to by-laws

The executive committee will propose an amendment to the constitution to be voted on by the membership at the annual meeting concerning the re-instatement of members and fellows who resigned or whose membership ceased for any other reason than non-payment. The proposal as formulated by the legal member of the advisory board, reads as follows:

"Any person who for any reason has ceased to be a Member of Fellow may, on written application therefor be reinstated, upon such terms and conditions, if any, as the Training Committee may recommend, and the Executive Committee in its discretion approve, and upon the payment of such sum, if any, as the Executive Committee may fix. Such application for reinstatement shall contain detailed information as to the work and activities of the applicant in Rorschach and related fields since the applicant's cessation of membership, and such other information as the Training Committee may in each case require."

4. The Nominating Committee asks the membership for nominations for the officers of the Rorschach Institute to be elected at the annual meeting. All members and fellows of the Institute are eligible for such nominations. A list of members and fellows was last published in Volume VII, Issue 3, pages 124 to 129. Since then the following have been elected as members:

Dr. Floyd O. Due, Lt.(s.g.) USNR, U.S. Naval Hospital, Oakland, Calif.
Mrs. Sophie Gottlieb, 225 West 86th Street, New York, N. Y.
Dr. George S. Klein, Psychological Research Unit #1, Nashville, Tenn.
Dr. M. Erik Wright, Ensign, H-V (S) USNR, U.S. Naval Hospital, Oakland, Calif.

Nominations are in order for the following offices for 1944-1945: President, Vice-President, Secretary and Treasurer. These offices were held in the preceding five years by the following fellows of the Institute:

1939-1940	President:	Dr. Morris Krugman
	Vice-Pres:	Dr. Douglas M. Kelley
	Secretary:	Mrs. Ruth Wolfson
	Treasurer:	Miss Gladys Tallman
1940-1941	President:	Dr. Zygmunt Piotrowski
	Vice-Pres:	Dr. Douglas M. Kelley
	Secretary:	Dr. Helen H. Davidson
	Treasurer:	Miss Gladys Tallman
1941-1942	President:	Dr. Marguerite R. Hertz
	Vice-Pres:	Dr. Douglas M. Kelley
	Secretary:	Dr. Helen H. Davidson
	Treasurer:	Miss Gladys Tallman
1942-1943	President:	Dr. Maria Rickers-Ovsiankina
	Vice-Pres:	Dr. John D. Benjamin
	Secretary:	Dr. Helen H. Davidson
	Treasurer:	Miss Gladys Tallman
1943-1944	President:	Dr. M. R. Harrower-Erickson
	Vice-Pres:	Dr. David Rapaport
	Secretary:	Dr. Helen H. Davidson
	Treasurer:	Miss Gladys Tallman

Nominations may be sent to the Chairman of the Nominating Committee:
Dr. L. C. Hirning, 8 Longview Drive, Scarsdale, N.Y.

II. ANNOUNCEMENTS OF REGIONAL DIVISIONS

1. New York Division

In continuation of its program printed in the October issue, the New York Division announces the following meetings at Psychiatric Institute, 722 West 168th Street, New York, N.Y.:

Monday, February 28th, at 8:15 P.M. - Dr. Fritz Schmidl "Potentialities of the Rorschach method in Juvenile Delinquency Research.

Monday, March 27th, at 8 P.M. - Dr. Kate Levine "Hypnotically Induced Mood Changes in the Verbal and Graphic Rorschach". Dr. Levine will supplement her report published in Volume VII Issue 4 of the Exchange with the actual Rorschach material.

2. Pennsylvania Division

In March the Philadelphia group will resume its beginners and advanced courses conducted by Miss Sadie Sender.

The Harrisburg group plans an advanced interpretation seminar conducted by Dr. Bruno Klopfer, on April 1st and 2nd.

3. Southeastern Division

The Southeastern Division plans a spring meeting in the University of Alabama, including a business meeting, a symposium on psychopathic personalities and an advanced interpretation seminar.

III. SUMMER WORKSHOPS

The eighth summer workshop at the Homestead, Crafts, N.Y., will begin with a dinner meeting on Sunday, June 11, 1944, at 6 P.M. and end on Saturday, June 24, 1944 at 4 P.M. Students may register for both weeks or for either one of the two workshop weeks; however, training facilities for beginners will only be provided during the first week. No previous Rorschach training is required for beginners.

Students may receive academic credit for the Homestead Workshop at Teachers College, Columbia University, registering for field work in the Rorschach method, Education s.j. 300 R X, for one to three points of credit.

Applications for the Homestead should be made before May 15, 1944. Write for application blanks or for further information to Dr. Bruno Klopfer, 3820 Waldo Avenue, New York, 63, N. Y.

Claremont Colleges, at Claremont, California, plans to offer this summer Rorschach courses for beginners and advanced students during the regular summer session.